



PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/627,121
	Filing Date	July 24, 2003
	First Named Inventor	Drew Hoffman
	Art Unit	Unknown
	Examiner Name	Unknown
Total Number of Pages in This Submission	1	Attorney Docket Number 100-0-0000 AAT-2.002C

ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Bradley M. Ganz
Signature	
Date	October 8, 2003

CERTIFICATE OF TRANSMISSION/MAILING	
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PTO/SB/82 (09-03)

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**REVOCATION OF POWER OF
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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/627,121
Filing Date	July 24, 2003
First Named Inventor	Drew Hoffman
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	105-2-0000 AAT-2.002C

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
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I am the:☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Name	Drew Hoffman		
Signature			
Date	10-8-03	Telephone	(503) 224-2713

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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